

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under
37 C.F.R. 1.53(b))

Attorney Docket No.	0054.1087-010
First Named Inventor or Application Identifier	Barbara A. Gilchrest
Express Mail Label No.	EL551543089US

08/04/00
 09/632748
 08/04/00

Title of
Invention

METHODS OF INDUCING HAIR GROWTH AND COLORATION

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

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| <p>1. <input type="checkbox"/> Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages [54]]
(preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to microfiche Appendix - Background of the Invention - Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets [16]]
[<input type="checkbox"/>] Formal [<input checked="" type="checkbox"/>] Informal</p> <p>4. <input type="checkbox"/> Oath or Declaration/POA [Total Pages []]</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d))
(for continuation/divisional with Box 17 completed)
[NOTE Box 5 below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>
Signed statement attached deleting
inventor(s) named in the prior
application, see 37 C.F.R. 1.63(d)(2)
and 1.33(b). <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a
copy of the oath or declaration is supplied under Box 4b, is
considered as being part of the disclosure of the accompanying
application and is hereby incorporated by reference therein.</p> | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy)
[] Pages c. <input type="checkbox"/> Statement verifying identity of above copies |
|---|--|

ACCOMPANYING APPLICATION PARTS

- | | |
|--|--|
| <p>8. <input type="checkbox"/> Assignment Papers (cover sheet & documents)</p> <p>9. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement [<input type="checkbox"/>] Power of Attorney
(when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [<input type="checkbox"/>] Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Small Entity Statement(s) [<input type="checkbox"/>] Statement filed in prior application, status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other: _____</p> | |
|--|--|

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
- [☒] Continuation [☐] Divisional [☐] Continuation-in-part (CIP) of prior application No.: PCT/US99/02362
- Prior application information: Examiner: Group Art Unit:

18. CORRESPONDENCE ADDRESS

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Signature	<i>Carol A. Egner</i>	Date	<i>August 4, 2000</i>
Submitted by Typed or Printed Name	Carol A. Egner	Reg. Number	38,866